

**U.S. DISTRICT COURT FOR THE NORTHERN DISTRICT OF ILLINOIS
ATTORNEY APPEARANCE FORM**

NOTE: In order to appear before this Court an attorney must either be a member in good standing of this Court's general bar or be granted leave to appear *pro hac vice* as provided for by Local Rules 83.12 through 83.14.

In the Matter of

Case Number: 08 cv 3124

THOMAS LEINENWEBER as Independent Administrator of
the ESTATE OF JAE HARRELL, deceased

v.

DUPAGE COUNTY, DUPAGE COUNTY JAIL, COUNTY
SHERIFF'S OFFICE, and JOHN E. ZARUBA

AN APPEARANCE IS HEREBY FILED BY THE UNDERSIGNED AS ATTORNEY FOR:

DUPAGE COUNTY, DUPAGE COUNTY JAIL, DUPAGE COUNTY SHERIFF'S OFFICE
and JOHN E. ZARUBA

NAME (Type or print) William R. Roberts	
SIGNATURE (Use electronic signature if the appearance form is filed electronically) s/ William R. Roberts	
FIRM DuPage County State's Attorney's Office	
STREET ADDRESS 503 N. County Farm Road	
CITY/STATE/ZIP Wheaton, Illinois 60187	
ID NUMBER (SEE ITEM 3 IN INSTRUCTIONS) 6275784	TELEPHONE NUMBER 630-407-8200
ARE YOU ACTING AS LEAD COUNSEL IN THIS CASE? YES <input type="checkbox"/> NO <input checked="" type="checkbox"/>	
ARE YOU ACTING AS LOCAL COUNSEL IN THIS CASE? YES <input type="checkbox"/> NO <input checked="" type="checkbox"/>	
ARE YOU A MEMBER OF THIS COURT'S TRIAL BAR? YES <input checked="" type="checkbox"/> NO <input type="checkbox"/>	
IF THIS CASE REACHES TRIAL, WILL YOU ACT AS THE TRIAL ATTORNEY? YES <input checked="" type="checkbox"/> NO <input type="checkbox"/>	
IF THIS IS A CRIMINAL CASE, CHECK THE BOX BELOW THAT DESCRIBES YOUR STATUS. RETAINED COUNSEL <input type="checkbox"/> APPOINTED COUNSEL <input type="checkbox"/>	